Declaration and Power of Attorney Under Patent Cooperation Treaty 35 USC §371(c)(4)

As a below named inventor, I hereby declare that:

my residence, post office address and citizenship are as stated below next to my name; that

		international app	olication number PCT/JP01/0	2969 filed April 5, 2	
	as amended on for which I solicit a pate	ent.	the specification and claims of	f which I have reviewed and	understand
or in	application in accordance ventor's certificate on the	e with Title 37, Consideration has been the with the with the control of the with th	formation of which I am aware code of Federal Regulations, §1. Deen filed in any country foreig egal representatives or assigns,	.56(a), and that no application to the United States of A	n for paten
يتدور	Japanese	Patent Application	on No. 2000-103038 filed April 5	5, 2000	•
			on No. 2000-326584 filed Octobe		
io erel ubst	by claimed under 35 US	SC 119. I hereby	(if any), filed within a year p appoint the following as my application and to transact all bu	attorneys of record with fu	pplication is ill power of
loge	r W Parkhurst Reg No	n 25 177: Charles	s A. Wendel, Reg. No. <u>24,453</u> ;	: Lawrence D. Risen Reg 1	Vo. 41.009
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ii 1	ALL CORRESPON	DENCE IN CON	NECTION WITH THIS APP	LICATION SHOULD BE	SENT TO:
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PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

3 Typewritten Full Name of Second Joint Inventor (if any)	2-00	Katsuhiko		_KUMAGAWA	4
		Given Name	Middle Initial	Family Name	
*4 Inventor's Signature #=		Katsuhiko		Humagaw	7.
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(Insert complete mailing address, including count					
	700	Hiroyuki		YAMAKITA	
Third Joint Inventor (if any)		Given Name	Middle Initial	Family Name	
		. .	Wholey Indas	A .	
*4 Inventor's Signature *		Hirogaki		Jamakita	
5 Date of Signature	Noven	iber	/		200 /
	Month		Day		Year
6 Residence	Osaka shi	Osa	ka	JAPAN	_ JYX
7 Citizenship	City Japar	State or	Province	Country	
(Insert complete mailing address, including country) Typewritten Full Name of		Masanori		KIMURA	
Fourth Joint Inventor (if any)	<u> </u>	Given Name	Middle Initial	Family Name	•
Inventor's Signature		masanori		Kimura	
			1		200/
Date of Signature	Month	lovember	/ Day		Year
	Daito-shi	Ogali	•	JAPAN	TPX
Residence	City	Osak State or P		Country	J1/ \
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	√-00		-		
Fifth Joint Inventor (if any)	, <u> </u>	<u> Michiko</u>	<u> </u>	<u>OKAFUJI</u>	
	G	liven Name	Middle Initial	Family Name	
Inventor's Signature		nich! ko		<u>Okatuji</u>	
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	Month		Day		Year
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Citizenship .	City Japanes	State or Pr	ovince	Country	
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Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

*This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) f the application to which it pertains.

PAGE 3 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

Second Joint Inventor (if any)	Sau	oshi		_ASADA_	
Sixth	Give	n Name	Middle Initial	Family Name	
Inventor's Signature	Sa	toshi	ASAĐA		
	Hou		~ /		
Date of Signature =	Month	, , , ,	Day		Year
Kana	zawa-shi.	Ishikav	·	JAPAN	J?
Residence Kana	City	State or Pro		Country	
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Post Office Address (Insert complete malling address, including country)	3-182-202, M	Iagae, Kanaza	wa-shi, Ishikawa 921	·8141 JAPAN	
Typewritten Full Name of Thirtidioint Inventor (if any) Seventh	Give	en Name	Middle Initial	Family Name	
Inventor's Signature					
Date of Signature					
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Inventor's Signature Date of Signature Residence Citizenship Post Office Address (Insert complete mailing address, including country) Typewritten Full Name of Pitch Joint Inventor (if any) Ninth Inventor's Signature	City		ovince		Year
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of the application to which it pertains.